

More, for less...

40%

Complete pair of prescription eyeglasses

20%

Non-prescription sunglasses

20%

Remaining balance beyond plan coverage

These discounts are for in-network providers only

Hello, Neighbor

- You're on the SELECT Network
- For a complete list of providers near you, use our Provider Locator on eyemed.com or call 1-866-299-1358.
- For Lasik providers, call 1-877-5LASER6, or visit eyemedlasik.com..

Lake County

Vision Care Services	In-Network Member Cost	Out-of-Network Reimbursement
Exam With Dilation as Necessary	\$0 Copay	Up to \$50
Complete Pair Eyeglasses Purchase Discoufull discount	ints*: Frame, lenses, and lens options must be purchased in sam	e transaction to receive
Frames	40% off retail price	N/A
Standard Plastic Lenses		
Single Vision	\$50	N/A
Bifocal	\$70	N/A
Trifocal	\$105	100 to 10
Standard Progressive Lens	\$135	N/A N/A
Lens Options (paid by the member in addition to the p	rice of the lenses)	
UV Treatment	\$15	N/A
Tint (Solid and Gradient)	\$15	N/A
Standard Plastic Scratch Coating	\$15	N/A
Standard Polycarbonate-Adults	\$40	N/A
Standard Polycarbonate—Kids under 19	\$40	N/A
Standard Anti-Reflective Coating	\$45	N/A
Polarized	20% off retail price	N/A
Other Add-Ons and Services	20% off retail price	N/A
Contact Lenses (Contact lens allowance includes ma	terials only)	
Conventional	15% off retail price	N/A
Disposable	0% off retail price	N/A
Laser Vision Correction		
LASIK or PRK from U.S. Laser Network	15% off the retail price or 5% off the promotional price	N/A
Additional Pairs Discount	Members also receive a 40% discount off complete pair	N/A *
	eyeglass purchase and 15% off conventional contact lenses once the funded benefit has been used.	
Frequency		
Examination	Once every 12 months	
Lenses and Contact Lenses	Unlimited	
Frame		
TUITIC	Unlimited	

^{*}Frame, lens and lens option discounts only apply when purchasing a complete pair of eyeglasses. If purchased separately, members receive 20% off retail price.